

CITY COUNCIL

CITY AND COUNTY OF HONOLULU 530 SOUTH KING STREET, ROOM 202 HONOLULU, HAWAII 96813-3065 TELEPHONE: (808) 768-5010 • FAX: (808) 768-5011

AUTOMATIC ACCEPTANCE OR REJECTION OF GIFTS

Ref: (D-830)

DATE:

November 18, 2009

TO:

Lester K.C. Chang, Director

Department of Parks and Recreation

SUBJECT:

Gift of value at \$2,500 or less

Pursuant to Resolution 05-349, CD1, FD1, relating to the guidelines for solicitation and receipt of gifts on behalf of the City and County of Honolulu, a request for an acceptance of gift (Communication D-830) was filed with the Council on October 19, 2009. As of November 18, 2009, the gift was deemed accepted.

BERNICE K.N. MAU

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City Clerk

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Enclosure: D-830

Acknowledgement:

Chair, Honolulu City Council

COUNCIL COM. 238

DEPARTMENT OF PARKS AND RECREATION

CITY AND COUNTY OF HONOLULU

1000 ULUOHIA STREET, SUITE 309 • KAPOLEI, HAWAII 96707 TELEPHONE: (808) 768-3003 • FAX: (808) 768-3053 • CITY WEB SITE: www.honolulu.gov

MUFI HANNEMANN MAYOR



October 19, 2009

The Honorable Todd Apo, Chair and Members Honolulu City Council 530 South King Street, Room 202 Honolulu, Hawaii 96813

Dear Chair Apo and Councilmembers:

Subject: Quarterly Report of Gifts Valued at \$2,500 or Less and Requested Acceptance

This report to the City Council enumerates all gifts taken into custody by the Department of Parks and Recreation for the quarter ending September 30, 2009. This report is submitted under the provisions of Resolution 05-349, CD1, FD1. Information on each gift is set forth in the attached Exhibit A.

We respectfully request the acceptance of these gifts by the Council on behalf of the City and County of Honolulu.

Please feel free to speak with John Blewitt at 768-3011, if you have any questions regarding this report.

Sincerely,

Lester K. C. Chang

Director

LKCC:mk

Attachment(s)

APPROVED:

Kirk W. Caldwell

Managing Director

DEPT. COM.

830

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CCM

LESTER K. C. CHANG DIRECTOR

RICHARD HARU DEPUTY DIRECTOR

EXHIBIT "A"

QUARTERLY REPORT OF GIFTS RECEIVED VALUED AT \$2,500 OR LESS UNDER RESOLUTION NO. 05-349, CD1, FD1

CITY AGENCY:

Department of Parks and Recreation

QUARTER ENDING:

September 30, 2009

The following gifts were taken into custody by the agency in the previous quarter.

Description of Gift	Donor's Estimated Value of Gift	<u>Donor</u>
Four section wood framed bulletin board for the Patsy T. Mink Central Oahu Regional Park, Veteran's Memorial Aquatic Center	\$ 800.00	Mr. Ken Suenaga Pearl City Aquatics, Inc. 1396 Komo Mail Drive Pearl City, Hawaii 96782
Monetary Donation Division of Urban Forestry	\$ 800.00	Friends and Family of Don Kusunoki c/o Mrs. Donna Kusunoki 3889 Poka Street Honolulu, Hawaii 96816-4407
Two sets of table legs – Patsy T. Mink Central Oahu Regional Park, Veteran's Aquatic Center	\$ 80.00	Mr. Edwin Chu 3713 Claudine Street Honolulu, Hawaii 96816
Two sets of table legs – Patsy T. Mink Central Oahu Regional Park, Veteran's Memorail Aquatic Center	\$ 80.00	Mr. Guy Takaki Old School Café', LLC 94-801 Kamehameha Highway Waipahu, Hawaii 96797
Monetary Donation Kamiloiki Community Park	\$ 300.00	Mr. Roger Dequina i9 Sports Association Post Office Box 26080 Honolulu, Hawaii 96825

Description of Gift	 Oonor's Estimated Value of Gift	<u>Donor</u>
Two Clothes Racks Ala Wai Golf Course Clubhouse 2 nd Floor	\$ 325.00	Mr. Warren T. Mitsunaga President Friends of Ala Wai Ballroom Dance Academy 2841 Koaniani Way Honolulu, Hawaii 96822
Monetary Donation Patsy T. Mink Central Oahu Regional Park, Veteran's Memorial Aquatic Center	\$ 300.00	Ms. Sandra Tanaka Budget Analyst Pacific Islands Regional Office United States Department of Commerce National Oceanic and Atmospheric Administration 1601 Kapiolani Blvd., Suite 1110 Honolulu, Hawaii 96814
Monetary Donation Kaneohe Complex	\$ 1,642.85	Mr. Harold Aloiau, Co-Chair Kaneohe Lions Club 46-144 Ohala Street Kaneohe, Hawaii 96744
Monetary Donation Haleiwa Alii Beach Park – Ocean Recreation and Water Safety Programs	\$ 1,000.00	Mr. Samuel W. Fisher, III Treasurer North Shore Lifeguard Association 59-300 Kaunala Place Haleiwa, Hawaii 96712
Monetary Donation Honolulu Botanical Gardens	\$ 500.00	Ms. Nancy Edmiston Garden Club of America 581 Pequot Avenue Southport, Connecticut 06890
Monetary Donation Honolulu Botanical Gardens	\$ 8.00	Mr. Darin Hajime 3045 Ala Napuaa Place Apartment 816 Honolulu, Hawaii 96818
Monetary Donation Patsy T. Mink Central Oahu Regional Park, Veteran's Memorial Aquatic Center	\$ 500.00	Mr. Dwight Toyama Executive Director Oahu Interscholastic Assn. 4361 Salt Lake Boulevard Honolulu, Hawaii 96818
Monetary Donation Honolulu Botanical Gardens	\$ 500.00	Merle Chong, Treasurer Kuan Yin Temple 170 North Vineyard Boulevard Honolulu, Hawaii 96817

Description of Gift	Donor's Estimated Value of Gift	<u>Donor</u>
Monetary Donation Honolulu Botanical Gardens	\$ 50.00	Ms. Dawn Kakuni Accounts Director Hongwanji Mission School 1728 Pali Highway Honolulu, Hawaii 96813

DECLARATION OF GIFT		
NAME OF DONOR	PEARL COM AQUATA	: CS
DONOR'S ADDRESS	1396 Komo Mai Dr	
DONOR'S TELEPHONE	808-456 1472	
STATEMENT OF OWNERSHIP AN	ND/OR TERMS OF CONVEYANC	E
I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.		
DESCRIPTIO	N OF CIFT	VALUE
Complete and accurate description of available. Bulletin Bavard Memorial Pool Four section wood framed bull. Veterans Memorial Aquatic Center at Company of the complete of t	fgift in detail. Enclose a photo if for the Veteraus etin board for the entral Oahu Regional Park.	Actual (if available) or Estimated
Signature: The During	Date: 6-5-09 Title: Apad Page	A DT A L
Print Name KEAL ALLERIAGE	1 Title (1 mar) Land	ロ レットュー ロググカイオーでき

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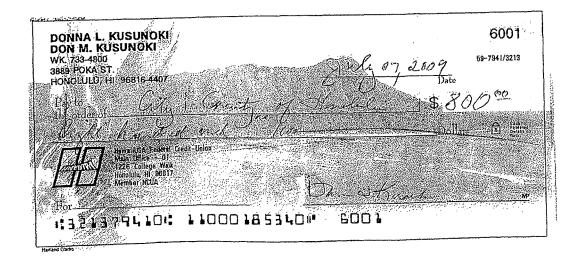
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DECLARATION OF GIFTNAME OF DONORFriends and Family of Don KusunokiDONOR'S ADDRESSc/o Mrs. Donna Kusunoki, 3889 Poka StreetDONOR'S TELEPHONE737-1590

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant, and convey the property to the City and County of Honolulu.

DESCRIPTION OF GIFT		VALUE
Check No. 6001		\$800.00
Monetary donation to be used for education in the Department of Parks and Recreation, Division of Urban Forestry.		
Signature: Danna Kusund	Date: July 7, 2009	
Print Name: Mrs. Donna Kusunoki	Title: Member	



City and County of Honolulu			
DECL	ARATION OF GIFT		
NAME OF DONOR	Edwin Chu		
DONOR'S ADDRESS	3713 Claudene	F. Hon 96816	
DONOR'S TELEPHONE	255-3080		
STATEMENT OF OWNERSHIP AN	ND/OR TERMS OF CONVEYAN	CE	
I own the item described below and des		-	
Honolulu. To carry out my purpose, I d	•	idition or reservation	
give, grant and convey the property to the	ae City and County of Honolulu.		
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DESCRIPTION		VALUE	
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available.		Estimated	
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	***	S	
Veterans Memorial Aquatic Center at Ce	entral Oahu Regional Park.	\$80.00	
Donatin OF Q Se	es of table		
Donatin of 2 ser Legs. v			
Legs v	alued att 80.00		
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Signature:	Date: 4/2-5/6	99	
Print Name: Edwin Chu	Title: membe	/	
-400 0. CVW	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

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City and County of Honolulu		
DECI	ARATION OF GIFT	
· NAME OF DONOR	Old School Cafe, LLC	
DONOR'S ADDRESS 94-801 (canche mella Huy ways 96797		
DONOR'S TELEPHONE	677-5163	
STATEMENT OF OWNERSHIP A	ND/OR TERMS OF CONVEYAN	CE
I own the item described below and des Honolulu. To carry out my purpose, I d give, grant and convey the property to t	lo hereby absolutely and without con	
DESCRIPTIO	N OF CIFT	VALUE
Complete and accurate description of	······································	Actual (if
available.	ght in detail. Enclose a photo n	available) or Estimated
Veterans Memorial Aquatic Center at Co Donation C Task be	entral Oahu Regional Park. OF ASetS OF GS - Valud at \$ 80.00	\$80,00
2		
Signature:	Date: 6/25 (0	<u> </u>

DECLARATION OF GIFT NAME OF DONOR i9 Sports Association DONOR'S ADDRESS POB 26080 Honolulu, HI 96825 DONOR'S TELEPHONE STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.

	DESCRIPTIO	ON OF GIFT	VALUE
Complete and photo if availal	accurate description of gift in deta sle.	il. Enclose a	Actual or Estimated
			300.00
Monetary Donat Park Director(s)		ation can be used for purposes deemed by the	
Signature:	Pour Dec	Date: 6/1/2009	
	· · · · · · · · · · · · · · · · · · ·	Title:	
Duran 4 37	Do say Dogwing	Program	######################################
Print Name:	Roger Dequina	Director	

DECLARATION OF GIFT		
NAME OF DONOR	Friends of Ala Wai Ballroom Dance Academy	
	Warren T. Mitsunaga President	
DONOR'S ADDRESS	2841 Koaniani Way	
	Honolulu, Hawaii 96822	
DONOR'S TELEPHONE	754-3980 cell 988-6618 res	
CTATEMENT OF OXINTEDCITO AND OD TERMS OF CONVEYANCE		

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

Friends of Ala Wai Ballroom Dance Academy would like to donate to the Parks and Recreation, Kapiolani District Park, Ala Wai Golf Course 2nd Floor Multipurpose Facility, free of any encumbrance, two (2) "Freedom Rail" clothes rack systems.

DESCRIPTION OF GIFT	VALUE
Two (2) Freedom Rail clothes rack systems to be installed in the Diamondhead dressing rooms or where needed.	\$325.95
Signature: Date: June 1, 200	0

Title: President

Print Name: Warren T. Mitsunaga

DECLARATION OF GIFT		
NAME OF DONOR	Sandra Tanaka/NOAA Fisheries/ PIRO	
DONOR'S ADDRESS	1601 Kapiolani Blvd. Suite 1110, Honolulu, HI 96814	
DONOR'S TELEPHONE	808-944-2287	

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.

DESCRIPTION OF GIFT	VALUE
Complete and accurate description of gift in detail. Enclose a photo if available.	Actual (if available) or Estimated
\$300.00	
Funds are to assist with daily operation and upkeep expenses of the Veterans Memorial Aquatic Center at Central Oahu Regional Park.	\$300.00
	ACT THE CONTRACT OF THE CONTRA
Signature: Addis 12 Date: 1/22/09	
Print Name: DALLDEA C. TAKLAKA Title:	

City and County of Honorara		
DECLARATION OF GIFT		
NAME OF DONOR Y KANEO HE LIONS C	- LUB	
NAME OF DONOR Y ANEO HE LIONS C DONOR'S ADDRESS * 46-144 OHALA ST.,	KANEOHE HT	
DONOR'S TELEPHONE 797-1846		
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE		
I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.		
DESCRIPTION OF GIFT	VALUE	
Complete and accurate description of gift in detail. Enclose a photo if	Actual (if	
available.	available) or Estimated	
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Check from Kaneshe Lians for Kancohe Complex Trust	1642.85	
Complex Trust		
: -		
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ignature: / Karl Warny Date: x 7-7-09	•	

DECLARATION OF GIFT		
NAME OF DONOR	North Shore Lifeguard Association	
DONOR'S ADDRESS	59-300 Kaunala Place	
DONOR 5 ADDRESS	Haleiwa, HI 96712	
DONOR'S TELEPHONE	638-7266	
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE		

The North shore Lifeguard Association desires to give a donation check of \$1,000.00 to the account of the Haleiwa Surf Center. To Carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the monetary donation to the Haleiwa Surf Center for the use in supporting the Haleiwa Surf Center's ocean recreation and water safety programs such as but not limited to: (1) the purchase of ocean recreation equipment and/or supplies, (2) the payment of water safety/ocean recreation fees and/or health & safety supplies, (3) the purchase of any items, supplies, or fees for youth volunteer programs.

DESCRIPTION OF GIFT	VALUE
\$1,000.00 via check # 1207	\$1,000.00
Signature: Lungus AU DAn M	Date: 7/21/09

DECLARATION OF GIFT		
NAME OF DONOR Garden Club of America		
DONOR'S ADDRESS	581 Pequot Avenue Southport, Connecticut 06890	
DONOR'S TELEPHONE		

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I own the item described below and desire to give the property to the City & County of Honolulu. To carry out my purpose. I do hereby absolutely and without condition or reservation give, grant and convey the property to the City & County of Honolulu.

DESCRIPTION	OF GIFT	VALUE
Complete an accurate description of gif available.	t in detail. Enclose a photo if	Actual (if available) or estimated
Check# 318		\$500.00
Signature:	Date:	
Print Name: Namey Edmiston	Title: Treasurer	

DECI	ARATION OF GIFT	
NAME OF DONOR	DARIN M. HAJIME	
DONOR'S ADDRESS	3045 ALA NAPUAA PL. 7 HONOLULU, HJ 96818	4816
DONOR'S TELEPHONE		
STATEMENT OF OWNER	RSHIP AND/OR TERMS OF CON	VEYANCE
I own the item described below and des To carry out my purpose, I do hereby a and convey the property to the City & C	bsolutely and without condition or res	
DESCRIPTIO	N OF GIFT	VALUE
DESCRIPTIO Complete an accurate description of available. MONSTAW DONATION	gift in detail. Enclose a photo if	VALUE Actual (if available) or estimated # 8.00
Complete an accurate description of available. MONTAN DONATION Signature: MANTAN	gift in detail. Enclose a photo if	Actual (if available) or estimated

DEC	CLARATION OF GIFT	
NAME OF DONOR	OIA	
DONOR'S ADDRESS	4361 Salt Lake BI	rd. Hen. 968
DONOR'S TELEPHONE	481-4394	
STATEMENT OF OWNERSHIP	AND/OR TERMS OF CONVEYAN	CE
	esire to give the property to the City ar I do hereby absolutely and without con the City and County of Honolulu.	•
DESCRIPTION OF COMPLETE AND ACCURATE DESCRIPTION OF COMPLETE AND ACCURATE DESCRIPTION OF COMPLETE OF C		VALUE Actual (if available) or
		Estimated
Funds are to assist with daily operation Veterans Memorial Aquatic Center at (· · · · · · · · · · · · · · · · ·	Estimated #GOO
· · ·	Central Oahu Regional Park.	
· · ·	Central Oahu Regional Park.	

DECLARATION OF GIFT		
NAME OF DONOR	Kuan Yin Temple.	
DONOR'S ADDRESS	170 N. Vineyard Blvd.	
DONOR'S TELEPHONE	Honorara, Mr. 30017	

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I own the item described below and desire to give the property to the City and County of Honolulu. To Carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.

DESCRIPTION OF GIFT	VALUE
Complete and accurate description of gift in detail. Enclose a photo if available.	Actual or Estimated
Donation (check #3 637)	\$500.00
Signature: Melle Chory Date: 1112/09	
Print Name: Merle Chong Title: Trasure	· C

DECLARATION OF GIFT		
NAME OF DONOR	Hongwanji Alission S	School
DONOR'S ADDRESS	1728 Pali Highwa 532-0522	
DONOR'S TELEPHONE	532-0570	
STATEMENT OF OWNERSHIP AT		
I own the item described below and des Honolulu. To carry out my purpose, I d give, grant and convey the property to t	lo hereby absolutely and without cond	
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DESCRIPTION		VALUE
Complete an accurate description of gavailable.		Actual (if available) or estimated
Check # 237	0 \$50.00	
Signature:	Date: 8/17/09	<i>></i>
	Exerci Title: Agricults L	